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23122 7590 10/28/2005

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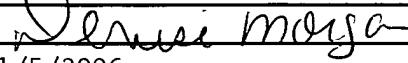
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| | |
|--|--------------------|
| Denise Morgan | (Depositor's name) |
|  | (Signature) |
| 1/5/2006 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/824,084 | 04/14/2004 | Rudolph G. Benz | ITTD-112US | 7016 |

TITLE OF INVENTION: INTENSIFIED HYBRID SOLID-STATE SENSOR

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 01/30/2006 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|
| KO, TONY | 2878 | 250-2140VT |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 RatnerPrestia

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ITT Manufacturing Enterprises, Inc. Wilmington, Delaware

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Issue Fee
 Publication Fee (No small entity discount permitted)
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Authorized Signature



Date 1/5/2006

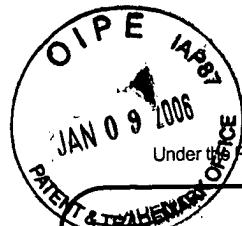
Typed or printed name Robert P. Seitter

24,856

Registration No. _____

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PTO/SB/21 (09-04) (AW 10/2004)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| | |
|----------------------|-----------------|
| Application Number | 10/824,084 |
| Filing Date | 04/14/2004 |
| First Named Inventor | Rudolph G. Benz |
| Art Unit | 2878 |
| Examiner Name | Tony Ko |
| Attorney Docket No. | ITTD-112US |

ENCLOSURES (Check all that apply)

| | | |
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| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee Transmittal (in duplicate); Credit Card Payment Form |
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| | | | |
|--------------|-------------------|------------------|--------|
| Firm Name | RatnerPrestia | | |
| Signature | | | |
| Printed Name | Robert P. Seitter | | |
| Date | 1/5/2006 | Registration No. | 24,856 |

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| Signature | | | |
| Type'd or Printed Name | Denise Morgan | Date | 1/5/2006 |

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